

March 9. 1829 Ch. ~~47~~ 113

1065<sup>th</sup> 4. An ad eund: of Bosphorus  
Inaugural Dissertatio<sup>n</sup> ~~Med:~~ Pro gradu  
on  
Cyananthesis Rubecula;  
for  
The Degree of Doctor of Medicine  
in  
The University of Pennsylvania;

Dated March 16. 1829

By

Alexander P. Moore  
of  
New-Port  
Rhode-Island.

Philadelphia March 9. 1829

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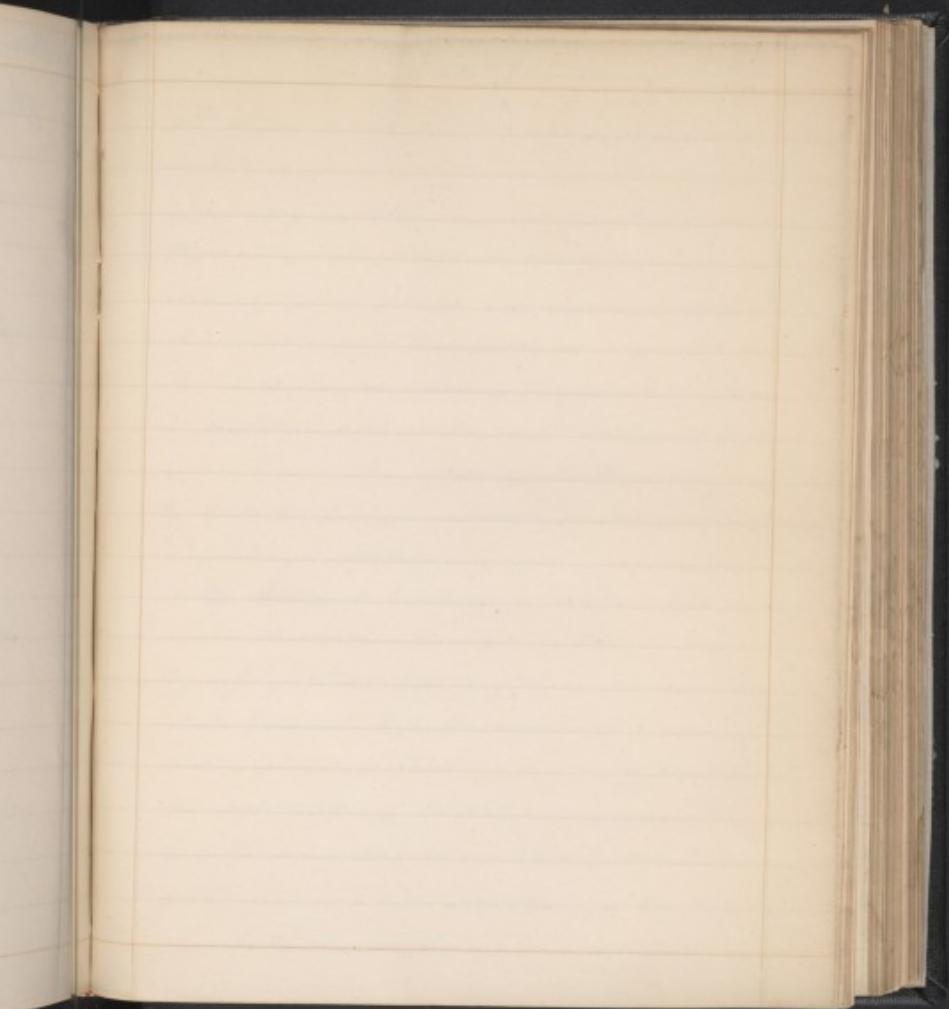
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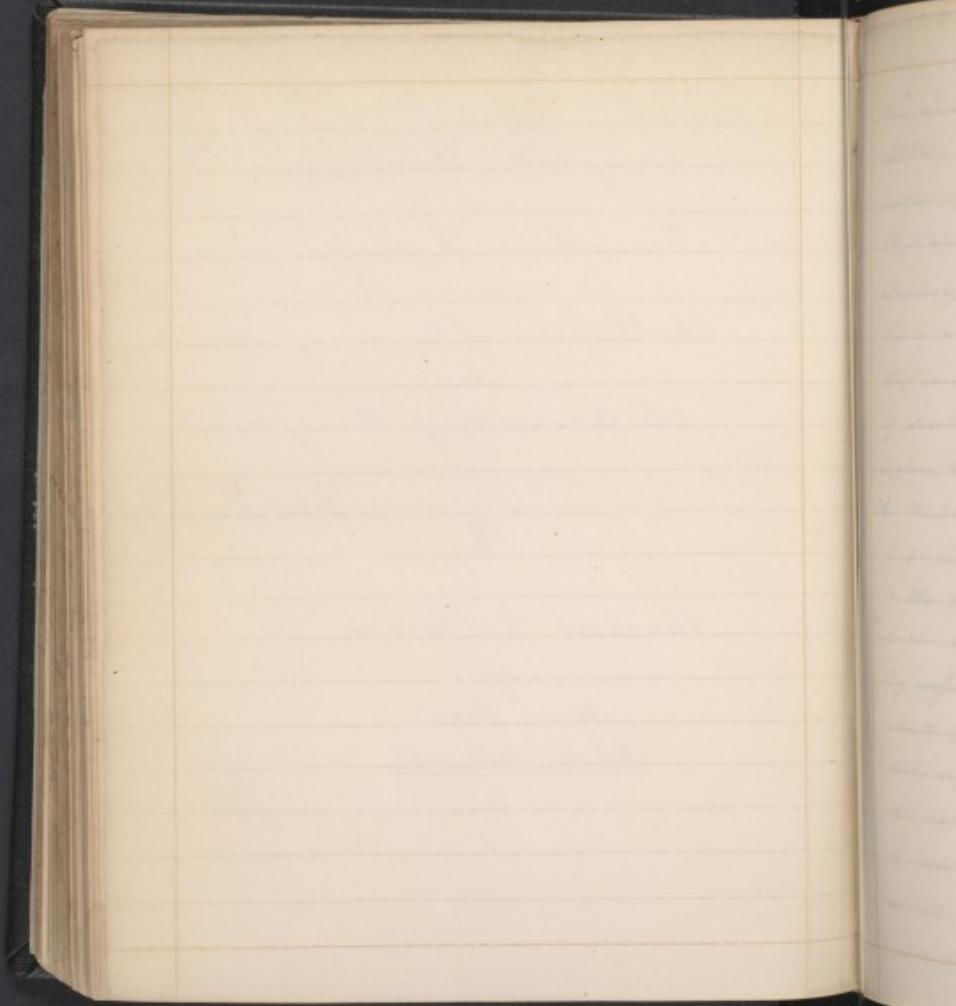
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dissemination of knowledge, and the value of the  
opinion or view of the author. If you do  
not make foreign reprintings, and so get  
a wider circulation, and so increase  
the business business is rather slow  
and there is a risk by so doing  
of getting to a stage of publication  
that from the date of your original  
writing a foreigner, at any rate  
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## Quæstusis Rubecula

1

The disease to which this name has been  
aptly given, we are told, comparatively of  
modern origin - the ancient Greek, & Roman  
Physicians, having left no accounts which can  
clusively prove that it was known to them.  
Some writers say Dr. Gooch, never fancied that  
they could discover traces of this disease, as well as,  
of Scarletina, & Small Pox, in the writings of Paulus  
Aeginet, & some other of the Greek Physicians, and  
he thinks the passages referred to, are too general, &  
imprecise, to establish any such conclusion,  
& he has not hesitated to declare that no  
such disease are described by them.

By referring to the history of these diseases we  
shall perceive, that the accounts given of  
their origin & progress, go, not only, to establish  
the correctness of Dr. Gooch's assertion, but,  
to prove even that the earlier Greek & Roman  
writers could not have seen them, as they had  
never prevailed in either of those countries -

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2

Previously to the commencement of the 8th century. Persecuting then the history of these maladies, we learn that they have been known in India, & China, from a very remote antiquity - that they were conveyed from India, to Arabia, about the middle of the 8th century, by the Arabian Merchants who traded on the western shores of Hindostan.

It does not appear however, that any of them had prevailed as a general & fatal epidemic, in Arabia, until a short time previously to the birth of Mahomet, or about the year of our Lord 569; when they broke out near Mecca, & raged with great violence, & fatality. From Arabia, they appear to have travelled westwardly, to the north of Africa, & well by the commencement of the 8th century extended over nearly all the eastern Provinces of Asia. Their long nature would have confined <sup>them</sup> to this periphery, under ordinary circumstances, is not easy to determine;

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out in the train of wars, that so frequently follow in the train of war, malignant, & contagious, diseases are not the least terrible, or destructive & accordingly we find, that, the diseases, of which I am now speaking were introduced into Spain, Italy, & France, by the Saracenic invasion, early in the 8th century. Having thus gained firm footing in these southern provinces, their baleful, & distinctive influence, was soon extended to the north, & they appeared in Switzerland, Saxony, England, & Northern Europe generally, about the latter part of the 8th, or beginning of the 10th century. By some it is asserted, that, however extensively these diseases may have prevailed on the continent of Europe, they did not appear in Britain, until the return of the soldiers who accompanied the Defeated Richard, in his expedition to the east, in the latter part of the 10th century.

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This is the account of what I am enabled  
to learn, concerning the origin & progress of  
the disease I am now considering, as well  
as, the exanthemata accompanying, with which  
it is most commonly associated.

Whether this author of their origin, & progress,  
be correct, or otherwise, is more than I am  
competent to determine. If it be correct,  
however, as is very probable, it would go satisfac-  
torily to prove, that, neither Paul of Alex-  
ander, nor his predecessors, could have seen  
these diseases, unless they had seen them  
in other countries than their own; & it shou-  
ld likewise serve to silence the clamour  
of Harvey, who would reproach the venerable  
fathers of our science, with negligency, or  
want of discrimination, because they have  
not handed down full, & lucid descriptions,  
of diseases which they had never seen. For  
indeed, it is not reasonable to suppose,

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that, this desolating trio of exanthems, had ever come either within the observation of the Coar Sage, or of those accurate observers of nature, who succeeded him, during a period of more than eleven hundred years. Had they once witnessed their now eyes, they they would have noted them with their usual discrimination, & a few vague & indefinite allusions, concerning them, would not be all the knowledge they would have transmitted to posterity.

But this perhaps, is to wander from my design, & to go too far in search of the age & birth-place of an object, whose nature development, & often refractory character, should be the more particular subjects of my regard.

At this distant period we cannot probably ascertain precisely where Rubella first made its appearance, or at what time;

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and as these circumstances, are fortunately, not very material to a knowledge of its present character, pathology, & method of cure, I will leave them to the curious, & pass to some notice of the disease as it appears at present in this country.

The three most striking characteristic phenomena of Measles, are the Ebullous exanthem, the Catarrhal affection, & the Effloration.

The eruption is indeed peculiar, & consists of a greater or less number, of reddish points, or spots, somewhat semi-circular in shape, dispersed over the surface in concentric groups, the intervening portions of skin being, for the most part, of the natural colour. This eruption takes place generally on the fourth day from the commencement of the attack; it begins to decline on the 6<sup>th</sup>, or 7<sup>th</sup>, & terminates in a beaming design

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mation, on the 8<sup>th</sup>, or 9<sup>th</sup>; now, & then, it happens, that the eruption assumes in its progress, a somewhat vesicular form, though this is rare, & a pustular appearance is so extremely uncommon, as scarcely to be mentioned.

This eruption is always preceded, & accompanied, with a fever, which is more, or less, inflammatory, or typhoid, according to the violence of the disease, the constitution of the patient, & the nature of the prevailing epidemic; & it will be more or less cerebral, according as the nervous fibers of the nasal, & pulmonary osseities, are more or less, sympathetically phlegmized.

This disease produces its full effect on the human system but rarely, & is said to assail infants, & children, more readily than adults.

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This last remark, is perhaps of doubtful correctness; it is unquestionably true, that we see much more of this disease in infants, & children, than in adults; but this can hardly be taken as a proof of their greater susceptibility to its influence, since it is well known, that most persons become subjects of the disease previously to adult age, & equally well known also, that they do not as a general rule, become subjects of a second attack. — Besides, it does not appear from all that has been proven on this point, that adults are *alteris partibus* less susceptible than children themselves.

As to the causes of this disease, little contrariety of sentiment seems hitherto to have been entertained; nearly all concur in ascribing it to Specific Contagion without however, inflicting us in what this contagion

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gion essentially consists, or from what sources it is derived.

From whatever source the stimulus that primarily excites the muscles action is derived, observation seems to have established the fact, that, being once introduced into the human system, it so interrupt & changes its natural functions, & excretions, as to render them capable of imparting to the surrounding medium, the same specific influence that first called it into action.

Strange however, as it may appear, this opinion as regards the infectious nature of Muscles, after having been received & acted on as an established fact for more than a thousand years, has lately been called in question, & arguments adduced to the contrary of this opinion. — With how much reason, & propriety, its

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infectious nature is disputed, I can not pretend to say, - I only know this much, if Measles cannot be communicated from the body of one labouring under the disease in its genuine form, to another who has not previously been affected by it, then mankind have been for a long-time strangely deluded, & since men, both professional, & learned, indeed as they have been, with the ablest talents, skilled in all the learning of their day, & possessed of the best & broadest fields for observation, have declared, not only that it may be so communicated, but have specified the time that the infection remains in the system previous to producing its specific effects, over four or to 14 days, generally for 8 to 11. If such men, under circumstances the most favourable, have suffered themselves to be so egregiously deceived, then we may

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with much propriety question the capacity  
of the human intellect, & doubt even ~~sits~~  
power of distinguishing between truth &  
error.

Although I do not believe that Measles  
arises primarily from a material & specific  
contagion, yet, I as much believe that,  
being once brought into action it is com-  
municable from one person to another as  
I do that Small Pox, can be so communi-  
cated. For this opinion I am suppor-  
ted by all popular observation - the con-  
current sentiments both of the "witty & the  
wise". - But in what particular manner  
it produces this effect, is not positively deter-  
mined; although, there seems little doubt  
that it is effected by a material vapour, or  
poisonous exhalation, arising from the body of  
an infected individual. -

This is the more probable, since we can even

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demonstrate, & it is a matter of almost daily observation, that, the excretions of the human body may be so changed by its own material actions, as to be capable of exciting in other bodies the same material phenomena; But to ascertain precisely how, & from what particular source the primary irritant originates, is a desideratum which although it now seems of difficult attainment, may hereafter be unfolded to our comprehension by some future, & fortunate, ~~anner~~ who aiming at improvement, may thus connect his name in co-extensive immortality with the Science he cultivates.

However difficult it may be to account for the production of the peculiar virus or in other words the peculiar exciting cause of Measles, there is little <sup>doubt</sup> of their organic origin, whether we regard them <sup>as</sup> material, or immaterial.

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regarding their causes as specific & material,  
they would most probably all find from one of  
the following sources, - either from accumulated  
filthy animal, or vegetable, acted on  
by some peculiar atmospheric influences,  
which are as essential to its perfect vivification,  
as they are incomprehensible, &  
& which, combined with the above mentioned  
factors, call into existence the genuine  
*Rabies contagion*. Or we might perhaps,  
with some plausibility, ascribe it to a malady  
arising from the human body itself, owing  
to crowded situations, personal filth, paucity  
of wholesome nourishment, or other accidental,  
& constitutional peculiarities, which are  
mysteries only because physicians  
have not hitherto hit on that particular  
manner of investigation, by which alone  
they can be comprehended & explained.  
Admitting therefore the existence of a material

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Amberes vision; it does not seem difficult to account in a plausible manner for its production, in places particularly circumstanced. But the great objection to its materiality is that, we cannot on this principle satisfactorily account for the apparent phenomena; it does not enable us to explain its singular diffusiveness & simultaneous occurrence, among families, & individuals, so distantly separated, & differently circumstanced.

If on the contrary, we regard the disease as not originating primarily from any material poison, but from some general epidemic prevalence, or atmospherical constitution, which predisposes the system to take an diseased action of this peculiar kind, independently of any abstract material category; if I say, this view be admissible, we can at once account for its

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appearance, & dissemination, in the manner  
above mentioned; & we shall no longer  
be surprised that, the inhabitant of the hill,  
or the valley, the crowded city, & the lonely  
cottage, the inmates of the filthy & ill-ventilated  
apartment, & the spacious hall, are all,  
nearly alike, subjects of the disease,  
& why all are so simultaneously affected.  
that, we are could suppose for a moment  
that the exciting cause was material, unless  
we at the same time supposed the sources  
of this material, to be coextensive with the  
disease, or even, with the atmosphere itself.  
Even admitting however, the exciting causes  
of *Bubos* to be material, & wholly  
arising from some general epidemic influence,  
we have yet, many difficulties to encounter,  
in as much as, we can not comprehend  
the actual causes, or source, of this peculiar  
atmospherical condition.

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seen with the most common features  
as we see them in a southern  
state, it is not unlikely  
that the people who have  
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more ready, evidently  
because of the greater  
facility of obtaining  
mining tools, to  
work at mining  
at the surface, and to do so  
without much trouble, than  
are those who have  
come from the north, where  
there is a want of  
mining tools, and  
therefore, they are compelled  
to work at great depths  
in order to get out  
the mineral.

We do not know for example, whether it is attributable<sup>to</sup> change of the relative proportions of the proper atmospheric constituents, — to an accession of foreign gaseous elements, — or whether it arise merely, from peculiar modifications of temperature or from different gradations of dryness, & humidity.

The fact however, that, these last mentioned circumstances are well known to exercise a very powerful influence over the mucous, & capillary tissues, of the system generally, will I think go much in favour of this last mentioned opinion.

Consulting medical authority on this subject, we perceive that, nothing has been actually demonstrated in relation to it, & that very little, or nothing, seems positively to be known.— We see however, that however justly the masters may boast of having carried

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the lamp of science, & inducive philosophy, into various other subjects which, were truly mysteries to the ancients, yet as regards this present knowledge of contagion & epidemics, that they have comparatively but little to boast.

They have indeed, pointed out some of its more probable sources, & ascertained apparently, a few of its more obvious laws;— But as in the theory of the seminarian & ecclesiastical missionings of the ancients, there still remains a mystery, an assurance, which they can not explain, & although they are not now more formerly, regarded in the superstitious light of an invisible demon, despatched from heaven to scourge mankind & avenge the insults of an offended Divinity, yet they are perhaps as little understood, & almost as ineffectually opposed.

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Measles when once called into existence, may be propagated according to Homme, by inoculation.

He states that by drawing blood from cutaneous veins where the tuberculous effervescence was abundant, he was enabled to produce the genuine disease, in 12 patients, by injecting into them all a small quantity of the fluid thus obtained.

The disease says he, appeared on the 6th day, after the operation, the eruption came forth in regular succession, & the disease passed through its regular stages, but with a decided mitigation of all its symptoms.

The disease when excited in this way he says, does not awakening & call into action the latent predispositions to scrofula, nor does it entail on the system those distempers, & other indomitable symptoms

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which, but too frequently follow the usual disease.

Notwithstanding however, what has been said by Dr. Home upon this subject, succeeding trials of the practice do not, from some cause or other, promise such favourable results.

Inoculation, as practised by Glouster, has we are told occasionally succeeded in other bands; though it has, by far, more frequently failed, & in the instances in which it has excited the disease, it was not at all more mild in its character, or less fatal in its effects, than when accidentally introduced.

By some it is doubted, whether, this disease can at all be communicated by inoculation; & notwithstanding high authority to the contrary, there is certainly some very good foundation for such an opinion.

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We are told by Dr. J. S. Caldwell, that experiments to this point were instituted in the practice of the Dispensary of this city in 1801, & after having faithfully tried, the bloody, the tears, the sev-uncous excretions, of the pulmonary & nasal cavities, as well as, the expectorant power of the cuticle properly ministered, they abandoned the pursuit without having succeeded in a single instance.

Upon the whole then I think we may reasonably conclude that the practice of insectation in this disease, if at all practicable, is by no means worthy of general adoption, & has therefore very naturally fallen into disuse.

Three varieties of Measles are noticed by author, viz. 1. Rubella Bulgaris, or common Measles.

2. R. - - Inecta or blue catarrho.

3. R. - - Nigra or Black Measles.

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In the 1st of these varieties, we have a rash slightly prominent, extending over the mouth, & fancies, a dry harsh cough, & an watery & inflamed.

In the 2 variety, the rash runs its usual course with little fever, or catarrhal affection, & affords no protection against the genuine disease.

In the 3 variety, above mentioned, the rash is of a blackish, or leaden hue, interspersed with yellow, protruding in its appearance, & prolonged in its stage, being for the most part accompanied with extreme languor & quaking of the pulse.

This disease most commonly makes its appearance in winter, & not unfrequently, prevails as an epidemic affecting such as have never before been its subjects especially children.

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month in which it most commonly occurs, & its prevalence will be more or less general, & extensive, according as the exciting cause happens to be more or less powerful, or as there happens to be few or many in this sphere of its action, who are unprotected by a previous attack. - In respect of sandy shores, as warm weather advances, however, the disease gradually declines, & either wholly disappears, or as if chagrined at losing its usurped, & tyrannic sovereignty, quits its reign by evading, here & there, an unhappy individual.

Although the approach of the warm season, most generally, checks the progress of the disease, yet this is not always the case, for, it has in many instances been known to prevail extensively, as an epidemic, during the warmest seasons, - &

and I am now writing in  
order to give you some information concerning my  
present condition & feelings. My  
condition is not good, and I have  
no doubt it is a result of  
overworking, but it is my  
misfortune to understand no one and  
to receive no advice either from a  
physician or a friend.

I am now writing to you to let you know  
of my present condition & feelings. I  
have been working hard for  
the past month, and I have had  
no time to rest. I have been  
working hard for the past month, and I have had  
no time to rest. I have been  
working hard for the past month, and I have had  
no time to rest. I have been

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sporadic cases ~~exist~~, the heats of summer  
are by no means uncommon.

How the increased temperature of the  
atmosphere operates in checking the progre-  
ss of this complaint, is more than can  
determine, & so far as I am acquainted,  
medical authors are either wholly silent  
upon the subject, or merely allude to it  
in passing, with a view to advance some  
idle conjecture, or to acknowledge candidly  
their total inability to explain it.

Supposing the Rubedoous contagion to be a  
material, & specific fluid, warmth might  
operate by diminishing its contagious power;  
although, this is precisely the reverse of  
what it is supposed to produce in regard  
to the peculiar virus of yellow fever, & some  
other of the contagious maladies.

Is it not however, more probable that var-  
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the progress of the disease, by a kind of negative agency, or in other words, by not producing, in the viscera, & especially tissues of the system, that peculiar irritation, which is at all times a sine qua non to its existence. This peculiar irritant, being once introduced, causes the general system to produce a general action, or more properly speaking excites in it a fibrile condition, in order to produce a metastasis of the umbilical action to the surface, which in this case becomes as it were, the center round which all the revulsive energies tending to restore, by thus changing the seat of the umbilical irritation from vital organs, to such as are less irritable & important, not only, relieves the suffering of the patient but, provides sure measures for her own security & protection.

It is here that we have an excellent <sup>Specimen</sup> of the

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wisdom, & recovery of her vis medicatrix naturae,  
with which the votaries of medicine were so  
much delighted, & by which a numerous  
train of succeeding physicians have  
been so fatally deluded.

Regarding her efforts as salutary, (whether they  
preserved or destroyed the patient as would seem)  
they preferred becoming idle spectators of her  
violent convulsions, or of her feeble, giddy,  
& ineffectual struggles, rather than interpose  
their much needed assistance, & aid her efforts  
by agents at once prompt, safe & effectual.  
Although the ministering energies of the system  
are called in to act in toto, or less, in every  
variety of disease; yet in the whole circle  
of vital phenomena there probably cannot be  
found a more striking, & beautiful illustra-  
tion of that wonderful & distinctive agency  
by which living matter, whether animal, or  
vegetable, is continually striving to repair

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its losses, & preserve its integrity, then that,  
which occurs in Exanthematous diseases.  
By some it has been supposed that Rubella  
in its epidemic character observed septem-  
rary resolutions; this however does not  
appear to be confirmed by observation, since  
the disease is more or less prevalent during  
every year; I might perhaps add in every  
season, of each year; other conclusively proving  
that there is little foundation for the remark.  
Charles as before observed, generally, occurs  
but once in its genuine form, ~~but~~ in  
in the same individual but we are  
well that a susceptibility to its action has  
occasionally been renewed & a second  
infection has followed.  
By others this ~~same~~ renewal of the  
susceptibility, is denied, & they account for  
a second attack in the same individual, by  
supposing that the 1st invasion was in-  
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perfect; or by some means so interrupted, as to prevent it from producing its usual, & specific impression upon the system.

That muscles does not generally occur but once in the same individual, is universally admitted; but by what peculiarity, & happen agency, the system is capable of receiving a second attack, will, perhaps, forever be clouded by conjecture & hypothesis.

That it does produce this effect, we are well aware, & we moreover see that as regards other stimuli it maintains in many respects, the same faculty for it is well known that various mechanical, & chemical, stimuli, cease to be operative on our organs in proportion as they are more frequently applied.

I mean this power in the system to accommodate itself to external impressions, Physicists, & Physiologists have conducted,

and seems to have been made up of  
the remains of a larger and more  
recently deposited mass. It is now  
a low, rounded ridge of sandstone of  
moderate thickness, which has been  
widely scattered over the surface of the  
country. It consists of fragments of  
sandstone and shale with interbedded beds of  
thin, fine-grained sandstone, which  
are very numerous. The upper part of the  
ridge is composed of a thin bed of  
shale, which is probably the same  
as the shale which forms the base of the  
ridge. This shale is very thin and  
is composed of fine-grained sandstone  
which is very soft and easily  
broken. The shale is covered by a thin  
layer of sandstone, which is  
very hard and durable.

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& that, be with much reason, & plausibility, that  
the susceptibility of the system is so increased  
by the primary application of the contagious  
miasm, as forever after to remain torpid  
to its influence.

This disease in its more ordinary form, or  
that of A. Antigatis, commences with the usual  
premonitory symptoms of fevers, such as shivering  
& flushed, tongue & upper lip, pain in  
the head, back, & loins, loss of appetite, &  
not unfrequently, necessary & vomiting of bilio-  
us matter. So few symptoms are now almost  
always added, considerable catarrhal aff-  
ection, as, coughs, sneezing, coryza, & soreness  
of the throat, oppressed or hurried respiratio-  
n, which generally, in the commencement lead the  
patient (of an adult) to suppose that he is suffer-  
ing from what he terms "a severe cold."  
The fever, & other symptoms go on grad-  
ually increasing, the cough is dry, & harshly, the

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eyes are inflamed, surfeeted with scrofulous humor, & markedly sensible to light, the patient becomes irritable, drowsy, & impatient of interruption.

Sometimes the bowels are unusually irritably, & in young children especially, frequent bilious discharges set by no means uncommon. The face & neck become flushed, somewhat blistered or apparently swollen, the pulse is generally full & feeble, the tongue is covered with a white film, the papillae are red & somewhat prominent. These symptoms together with a tremblesome shivering of the surface, especially of the face, & neck, swelling of the eyeballs; pain & soreness of the chest, soreness of the throat, & sometimes difficult, or painful respiration, usher in the appearance of the eruption which usually takes place on the 4th day of the attack, as before observed, at

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This time a drowsy, or somnolent state, is very common, and especially for children of gross habits & plethoric adults.

The eruption appears first on the face, neck, & breast, though it may be seen on the roof of the mouth, where the soft paltry & thin membrane of the fauces & throat, some time before it makes its appearance on those parts. From the face, &c. it gradually extends to the body & extremities, & about the 6<sup>th</sup> day begins to turn brown where it appeared, & so on other parts in the order of its occurrence.

On the 9<sup>th</sup> or 10<sup>th</sup> day a blisters desquamation disappears, & by the 11<sup>th</sup> or 12<sup>th</sup> in ordinary cases, no traces whatever of the eruption are left. In muscles the coming forth of the eruption does not remove the fever, or very much lessen its violence, as is the case in variola; on the contrary it frequently

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usually happens first, and only the fever, but  
the symptoms generally are considerably  
aggravated, & with the exception of those  
wanting <sup>the</sup> & ~~gastro~~ intestinal, which are for the most  
part relieved by the eruption, we do not  
find much abatement of the sympto-  
ms until the diarrhoea begins, at  
which time it frequently happens that  
a gentle diarrhoea comes on which  
is always (being mild) salutary in remov-  
ing the remains of the disease, as well  
as the phlogosed condition of the mucus-  
ous tissues. This ends it will generally  
effect by the 10<sup>th</sup> day, when no remains  
whatever of the disease will be seen in  
a large majority of instances; — it often  
happens however, that this salutary  
tendency of the diarrhoea is totally inter-  
rupted either by indisposition on the  
part of the patient, or a misjudgment —

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medication. As the disease declines so  
will pulmonary symptoms frequently  
reappear, which require the most prompt  
& skillful medical assistance.

This symptom is frequently a consequence  
of too early exposure to cold, & it very  
frequently, often lays the foundation  
for Phthisis Pulmonalis.

Although the symptoms of this variety  
are usually mild, yet it sometimes happens,  
that, they are so violent as even  
to distract the patient in an early stage  
of the attack - in such cases the fever  
is violent, there is great gastric uneasiness,  
difficult respiration, coma, delirium, spasms  
of the limbs, or general convulsions.  
There is a particular form or modification  
of this variety alluded to by Dr. St. John,  
& which would seem entitled to a more  
distinct, & particular notice, than he has

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thought proper to bestow upon it.  
In the fever which I allude to, the  
fever is either a Typhochus, or Typhus,  
more commonly the former; though  
it sometimes happens that typhoïd, or  
malignant symptoms, appear from  
the first constituting a genuine  
atonic variety, whereas the more com-  
mon form of the disease is decidedly  
of an entoxic character.

Keeping these circumstances in view,  
so we practitioners have <sup>with</sup> most propriety  
contemplated the disease <sup>under</sup> two modifica-  
tions only, that, of the common aton-  
ic or inflammatory variety, & the atonic,  
typhoïd, or putrid, omitting what have  
been termed the Black & The perfect varie-  
ties; as of little practical importance, &  
more calculated to perplex them to enig-  
mize the practitioner.

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The eruptions of the modified cutaneous  
of which I am now speaking, are de-  
cidedly more violent, & alarming, than  
in the one previously described.

The eruption is often so profuse as to  
resemble the eruption of Roseola; it  
makes its appearance nearly two days  
earlier, in some instances; it sometimes  
happens in this form also that when

the eruption suddenly changes, & from  
being highly inflammatory, they quickly  
assume a typhoid, or malignant ap-  
peal; the eruption loses its floral  
hue, & becomes brown, or livid; some-  
times also petechiae appear, accompa-  
nied with inflammation of the throat, &  
frenes, a dark bow fur upon the tongue,  
& other signs of putrefaction.

Now & then it happens that the eruption  
as suddenly ceases, owing probably

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to a deficiency of the vital energies, or  
excessive gastric irritation, & these, un-  
less we quickly restore it to the sur-  
face, the patient is irrecoverably lost.  
In such cases the brain, stomach,  
lungs, &c. or other internal organs,  
almost always suffer, owing to the  
violence of the disease being as it  
were suddenly reflected inwards,  
producing violent pneumonic inflam-  
mation, & consequent dyspnoea & oppres-  
sion, coma, delirium, excessive vom-  
iting, or obstinate diarrhoea, according  
to the organs assailed, & the particular  
circumstances of the patient's constitution.  
This variety is noticed by Sir Wm. Mat-  
son, it occurred among the children of  
the Foundling Hospital in 1783 & 8, &  
was by him denominated putrid mea-  
sles. Pneumonic symptoms very often

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accompany measles, & sometimes the disease as an epidemic is characterised by this tendency, we remember it to have prevailed says Doct. Dousset early in the spring of 1785, &c, at which time almost every case was marked with symptoms of pulmonary inflammation.

The 2 variety or imperfect measles as it has been called, seems in a practical point of view to be entitled to but little attention; the fever, & cataleptic affections, are for the most part mild, & require merely that the patient should be protected from the pernicious influence of cold; (which is always to be avoided in measles) take warm mucilaginous drinks, & if the bowels be constive some mild aperient medicine.

This variety is indeed a mere rubescency, & is wholly destitute of the most essential

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The important character of genuine measles,  
is, that of protecting the system against  
a ~~subsequent~~ <sup>subsequent</sup> attack.

Doct Miller in his Discription & treatment  
of cutaneous diseases, order B, part 1<sup>st</sup>, men-  
tions cases of this kind, wherein, the apparently  
rubulous efflorescence, having sub-  
sided without, most fever, or catarrhal  
affection, has appeared on the 4th day  
from its commencement a new efflores-  
cence, with violent disorders of the con-  
stitution. In these cases it would seem  
that the 1<sup>st</sup> impression produced on the  
system was insufficient to produce  
the genuine rubulous action, consequent-  
ly a rubescent was the result, but  
a more powerful impression quickly  
succeeding, excited the subsequent erupt-  
ion, & developed the genuine disease.  
The B variety of this disease occurs as before.

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mentioned in persons whose constitutions are generally weak, & seems to be connected with a relaxed or debilitated state of the cutaneous capillaries in particular hence we have effusions of sero-sanguineous fluid, forming petechiae beneath the cuticle, giving to the variety its particular nosological character.

In these cases however there is generally little danger to be apprehended, notwithstanding the pitiful aspect of the cutaneous surface, or the general languor, anxiety, weakness & quickness of the pulse. They are all promptly relieved says Doct Good, by the exhibition of Infus. Licit, & Blix Nit. until a Typhus infection happens accidentally to be introduced, when they become of course of the same nature as the typhoid variety, above alluded to, & are to be curiously

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ious by watchful, & treated on the same principles as will be hereafter mentioned for the cure of that particular modification.

as to the Pathology of this disease, a very different view seems now to be taken, from that which was formerly entertained; instead of ascribing it to a general contamination of the circulating fluids, arising from a material, & specific poison, it is regarded by modern Pathologists as a genuine irritation, seated primarily in the mucous tissues, more especially of the stomach & alimentary canal.

To prove the correctness of this doctrine, we must apply to these we must to post mortem examinations, which almost uniformly demonstrate a highly phlegmous condition of the mucous lining of these organs, as well as those of the throat, & lungs, all which

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are in almost every instance seriously implicated, & in many instances manifest a strong tendency to sphaerulosis.

The lungs however are often found in a phlegmatic condition, & in such as die under the eruptive we are told, that the lung membranes of the Yangtze & Amakiri are covered with the efflorescence as in small pox. This is ascribed the increase of the lymphatic & pleural ophrysin, so often observed in the eruptive stage of the disease. Sometimes engorgement of the brain, or abdominal viscera all tend to be met with, & it is an uncommon occurrence to meet with marks of a high degree of inflammation in the mucous membranes of the mouth, fauces & throat.

There is one other circumstance connected with dubious action, which I have not hitherto taken notice of - & allude to its power

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of suspending the vaccine, & variolous actions. Now if measles be taken a sufficient time previously to the inoculation of variola, so that the eruption may commence before the variolous action comes on, the progress of the latter will generally be suspended until the ruborolous fever declines, when it will immediately resume its influence over the system, & pass through its regular stages as if no interruption had taken place.

It is further asserted in relation to this point that if measles appear for instance two days after the eruption of small pox has taken place, that the variolous eruption will be stayed, until the measles disappears, & then resume its regular progress as in the above mentioned instance. In account for the singular control which the ruborolous action is seen to exercise over

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the variolous, Physiologists have supposed  
with Mr. Hunter that the two actions can-  
not, or at least, do not readily take pos-  
session of the system at the same time;  
But even admitting this existence of this  
law of the animal economy, there  
is still a difficulty, for in all such  
circumstances the stronger impression,  
ought always to subvert the weaker;  
whereas, in the instance before us, it would  
seem at least that the reverse of this  
is the fact; since we cannot well  
believe (judging from the comparative  
effects produced on the system by those  
diseases) that the power of the tuberculous  
is greater than that of the variolous impres-  
sions; it may & probably does possess  
rather more of the pure inflammatory character  
generally, but as to its general controlling  
influence upon the system it would certainly



appear to be decidedly inferior in power.  
In regard to the Diagnosis, in this disease  
it may be observed, that, in some instances  
it is difficult, & has formerly been  
confounded with other eruptive diseases,  
as varicelli, & scrofula, as also, in its  
earlier stages with catarrh.

The disease will be distinguished from va-  
ricelli, by the catarrhal affection, which al-  
most invariably attends it; whereas in  
the latter case it is never or very rarely observed.  
As the disease advances & the eruption is  
developed, there is little difficulty in making  
a proper distinction, since the eruption in meas-  
les terminates by desquamation, whereas in  
chicken-pox, there is imperfect pustulation  
& scabbing; the eruption also appears much  
earlier than in measles, & the accompan-  
ying fever is much milder, & more uncertain  
in its duration.

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These diseases, in their early stages, are  
easily distinguished, by the cerebral affection of the first preceding  
the fever in the former; whereas in  
the latter, the fever most generally precedes, or  
commences with, the cerebral symptoms.

If however the circumstances of the fever  
should prevent us from distinguishing  
these affections in their earlier stages, no  
injury would probably result from such  
a mistake, since both diseases at this  
time require the same management.

To distinguish measles from scrofula  
is a task in some instances extremely  
difficult; here, however, the most skilful, & experi-  
enced, have confounded their embarrass-  
ment. Some distinctions seem to attach most  
importance to a proper distinction between  
these disorders; for say they, a very different  
management is required for each.

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On my own part, I cannot perceive why  
it should be in a practical point of view  
so very important to make this distinction;  
unless, it be supposed that we are to treat a  
disease according to its Name, instead of  
being guided by the condition of the sys-  
tem, & the phenomena before us.

It is no doubt true that Secretation, is more  
frequently attended with an ataxia, or syn-  
kinesis, convulsion of the system than Malaria,  
& consequently will require a less ~~acute~~  
prolonged treatment; but I can not see  
any sound reason, why an identical  
morbid condition of the system, should  
not be treated on the same gen-  
eral principle, whether, it be produced by  
Malaria, Secretation, Small Pox, or any  
other disease.

There may be here more demand for cautious  
watchfulness, & attention; I would therefore

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in such cases of doubt, & perplexity, endeavour carefully to ascertain the actual condition of the organs generally, & the force & vigor of the vital energies in particular; whether there were an actual deficiency, or excess, of action, or whether a mere semblance of general prostration, were present, owing to a phlegmated condition or engorgement of particular organs. These points being thoroughly well understood, & duly appreciated, the ingenious Practitioner will I believe seldom err in deducing his methods Melancholia, — although it very frequently, that the best medication in such instances is impotent, & unavailing.

There are however several points of difference, between these diseases, which it may be well to bear in mind. —  
1st. In Scarlet fever, there is generally

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little or no cutaneous affection; - in muscles  
on the contrary it is always considerably  
frequently severe.

2 in scurffiness the eruption is more generally,  
& diffuse, redder, distinct, & elevated, except  
perhaps on the inner surface of the thighs &  
arms; while in muscles the eruption is  
generally distinct, & elevated, giving a dis-  
tinct sensation of roughness to the touch; the  
intertitial portions of skin retaining their  
natural colour.

3 In scurffiness, the eruption appears 24, or  
48 hours, earlier than in muscles, is of a  
scarlet hue, & gives no distinct sensation

4 of roughness, except as above mentioned; in mu-  
sles however, the rash gives decidedly the  
sensation of roughness, & has more of a  
chicken skin.

With the scurffiness, there is generally no swelling  
of the margins of the eyelids, while in muscles,

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6<sup>th</sup> Indirect  
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this symptom is so generally present, especially about the time of the eruption, as by some to be regarded as one of its most certain pathognomonic.

5<sup>th</sup> In scrofula, the papillæ of the tongue are particularly elongated, their points projecting above the whitish or whitish fur with which it is commonly covered; these papillæ are for the most part of a bright scarlet hue. In measles this elongation of the lingual papillæ, is ~~more or less~~ <sup>more or less</sup> conspicuous, although it is mostly present in some degree.

6<sup>th</sup> In scrofula, instead of drooping, impatience, <sup>more or less</sup> there is often a peculiar anxiety, restlessness, & depression of spirits.

7<sup>th</sup> Scrofula decidedly predisposes to, & is often followed by suppurative effusion, when as measles, is comparatively speaking, rarely followed by such a result.

The Prognosis, in this disease is generally

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favourable, & must be deduced from the mode  
of the attack - the type of the fever;  
the Constitution of the patient, its Pathological, or  
superficial, predispositions; the degree of congestive  
Irritation, & consequent Engorgements  
of the Lungs, Brain, Stomach or other organs.  
Violent fever especially of a typhoid character,  
the respiration being tardy, irregular, or  
suddenly disappearing, without dyspnoea, or  
becoming pale, a bird, accompanied with  
petechiae; the presence <sup>of stupor</sup> comes, or delirium,  
the superintendence of violent pneumonitis, - such  
an prostration of the vital energies, dysp-  
noea, or violent mortify & convulsions, are  
always unfavourable appearances, & should  
not fail to awaken serious apprehensions  
in the mind of the Practitioner, & to elicit  
also his greatest watchfulness & skill.  
On the contrary the attack being mild,  
the fever moderate, & of the anterior grade,

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a freedom from local determinations, or  
engagements, the complexion being proportioned  
to the degree of power, & regular in its app-  
earance & progress, the skin being moderate  
by heat, & in a perspirable condition, the  
cough being mild, the expectoration free,  
& a mild diarrhoea, supervening, point out a favourable termination & should  
always be heralded with Joy & Gladness,  
by the Practitioner.

In the treatment of this, & as well as,  
in all other general Exanthems the  
Physician is not to aim at curing the  
disease & he must therefore content himself  
with lessening the humble Petet, & Coady-  
woty of Nature, whose wonderful & in its  
stomatice effects, under a judicious guidance  
& regulation, are not only the safest, & best,  
but so far as has hitherto been discover-  
ed the only remedy in disease.

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We may indeed supply a fortitious organ, as a leg, or an eye; but the recuperative energies of nature can alone restore acquired parts when deficient, or accommodate the actions of the system to the inconvenience, or injury sustained. We may relieve the system from Fletcheric oppression by abstracting blood; but we could never remedy disease by so doing, unless the restorative tendencies of our organism resumed their natural sovereignty, & conquer'd with our assistance the enemies that assail them.

Our diseases seem to have been more inadvertently managed from the time of Shakes, & that of Sydenham, than the one of which I am now speaking. The causes of this mismanagement however, were directly traceable to the cruel neglect, which were entertained in

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regard to its nature, & pathology. —  
Believing as they did, that, the entire  
mass of circulating fluids, was poisoned,  
contaminated, & loaded with a mortific  
matter, their whole attention seems to have  
been directed to its immediate elimination  
from the system.

For this purpose the unfortunate sufferers  
were indiscriminately forced into close &  
narrow apartments, or half stifled under  
bed clothes, & dosed with hot decoctions,  
vegetable infusions, or even more stim-  
ulating beverages, without any regard  
either to the particular ... tone of their  
constitutions, or the nature & violence  
of their disease.

Places however, as Arribus of the  
9th century & one of the first writers on  
Small Pox, seems to have treated this  
class of diseases with more judgment

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& discrimination; viz. upon the general principle ofgradiently the fever; while his successors, strangely forgetful, or wantonly disregarding, the wholesome admonition of considering, a great fever, as a "great evil," in these cases, seem to have measured the aberration of their skill, by the quantity of fever, & consequent ambition they could produce.

It does not seem to have occurred to them that, this morbid passion which they were so scandalously undiscouraging to force from the system, could be multiplied by the violence of that action itself excites, or that a still higher degree, would wholly defeat the object both of Nature & the Physician.

This was reserved for the Genevese, & judicious Sydenham, who notwithstanding the tenacity of his theory, boldly

expenses of your trip

ventured to follow the dictates of mat-  
urely & to produce such a revolution  
in the treatment, not only of exanthems,  
but of diseases generally, ~~as~~ as will  
forever justly entitle him, to the  
appellations of modern Hippocrates, &  
Peregrine of medicine.

Taught by the judicious observations,  
& experience of Sydenham, as well as,  
the more recent improvements of  
pathological science, the moluccans even  
almost unanimously agreed as to the  
great principle, that should direct  
them in the management of Exanthema-  
tous diseases.

Anbecka, owing to its frequent occurrence,  
has received its due share of attention;  
it is regarded as <sup>a disease</sup> decidedly inflammatory  
in its general character, & equally  
well known to require in a large ma-  
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of instances, no active remedial measures. It is therefore the incidental symptoms, & more aggravated forms, of the disease that we are called on to remedy, & consequently it is of these, that I shall more particularly speak. If then at the commencement of measles, there be high fever, severe pain, vertigo, & oppression; there can be no doubt of the propriety of detaching blood; cautiously gradually quantity taken, to the age & strength, of the patient; the violence of the disease; the nature of the particular epidemic, & the immediate effect produced.

We should also, in such cases, employ a strict adherence to the antiphlogistic regimen, & should the stomach & bowels be disordered, emetics, & purgatives are to be used. Domestic Doctor & Specieculum,

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fulfil the former indication best in cases of adults, not for children, the Vin. Antise combined with Mel. Siccata or tabacum alone should be preferred.

The 2<sup>d</sup> indication, should be fulfilled by calomel, combined with Rhei, or jada, or taken alone being followed by al. Acet. to shorten its operation. The patient should also drink freely of mild mucilaginous liquids, such as infusion of flax seed, Gr. aromatic water, partly water &c, slightly acidulated with vegetable acids, & if the fever run high manometric doses of asturants, should be given, aided by Nitre & cold water which is exceedingly refreshing, & may be drunk ad libitum, always preceding against very large draughts at a time) this fluid was the Descrip<sup>g</sup> a Mysuru with some of the ancient Spy  
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Physicians, & may be taken with more safety, & advantage, in almost every disease, than is commonly supposed. I believe its use is often prohibited when it would of itself, if gradually taken, be of infinitely more service than the drugs that are imperfectly made to usurp its place -

The cough of troublesome should be allayed by demulcents, & opiates, & those which answer this purpose best, are perhaps common molasses candy, extract of liquorice, & syrup of poppies which last is of all others the most affectual. It is important that the cough should be checked, as the irritation produced by it, together with the loss of sleep, will very much aggravate the fever, & other symptoms. The tendency of opiates to heighten fever & favour local excretions,

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may be abated by combining them with  
antimonials, in the following manner

As. Acet. Op. f. 3j

Wm. Anti. 3f

Syr. Bell. Dolat 3f or

of this mixture an adult may take a tea-  
spoonful three times. Owing to the catarrhal  
tendency of this disease, we cannot expose  
the patient to the full influence of cold  
air, so salutary in small boys & even  
therefore we confine to a mild & equa-  
ble temperature, & reluctantly avoid  
the extremes of heat, & cold; a thermo-  
metric range of from 60, to 64, degrees is  
perhaps the best we can advise.

I am aware that opiate, in this disease  
are by some considered questionable, in  
the early stage, but if the fever be  
shutly reduced by the above mentioned  
measures, it will require but small doses

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of these medicines to produce the desired effect, which effect is of much importance, & will more than compensate for the ill effect, which too nearly has a tendency to to cease. In reducing the system to the state in which opiates become admissible, & in which they certainly produce such decided benefit, we must ever heed fully in view the nature, & tendency of the prevailing epidemic, as these will very materially influence the extent, to which antiphlogistic, & preparatory measures are to be carried. Sometimes the character of the epidemic, is so decidedly ~~inflammatory~~, as to require, repeated & extensive evacuations; whereas in other instances, the ~~hypnotic~~ predisposition requires us to be extremely circumspect, in the use of these remedies. These important circumstances were

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long since pointed out, & strongly insisted on by experienced men, & deserve perhaps much more attention than they have generally received.

It sometimes happens that the force of this disease centers as it were upon the lungs, in such cases, it will be proper to resort immediately to local, & general bloodletting, if admissible; & here we must not be deceived, in many instances it affords the only chance for the patient, & I believe I have seen it succeed in two or three instances where it did not seem admissible, but having <sup>and</sup> other remedies ineffectually, & even lost all hope of recovery, it was turned to as a desperate resort, & was completely successful. This is a point strongly insisted on by Sydenham, & he says the only remedy in such cases, in which we can depend

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The depletion however, must be cautiously regulated where there is a typhoid fever position; here also local blood letting will be useful, after it is no longer prudent to take it from the general circulation, the auxiliary measures, as blisters, <sup>the</sup> sudorifics, & senna pions, will here be serviceable, & should never be overlooked. Then too if the Dyspepsia be great, we shall sometimes be aided in reducing it, by directing the patient to inhale the vapour of hot vinegar & water, into which a few drachms of sulphur ether has been added.

Sometimes it happens that the pectoral oppression, arises from plethora, or tenacious mucus, obstructing the bronchial; & in such cases we must have recourse to cough-ticks, which frequently in such instances cure

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have a threefold beneficial effect,  
viz. that of freeing the stomach of  
its irritating <sup>contents,</sup> & dislodging the accumulated  
fluids from the bronchial tubes,  
and interrupting, or changing the morbid  
actions of the general system, & regulating  
the circulation.

When the fever, & difficulty of breathing  
continues, & it is judged that further  
depletion would be inadmissible,  
it has been advised to prescribe  
the tinct. of Digitatois in full doses,  
with a view to diminish the velocity of  
the circulating fluids, & thus lessen the  
quantity thrown upon the lungs. &  
in such cases we are told that the fever  
has been diminished, the bowels allayed,  
the bowels relaxed, & a general mitigation  
of the symptoms produced.

There often such nobly results may

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be obtained from the action of this medicine, I cannot say; but from the uncertainty of its operation, & the influence which the position of the patient's body exercises over its power of lessening arterial action, will I have much inclined to think always render it a very doubtful resource in such cases. I have seen it given in a few instances only, & in these the pulse was but little moderated in frequency, which circumstance, might in part perhaps be owing to the semi-recumbent position of the patients, they being unable to maintain the recumbent posture, on account of the urgent dyspnoea. Besides its uncertainty of effect, theory would not seem to furnish surely even were its operation uniform, for admitting it to lessen the frequency of arterial pulsation in a large majority of instances, this simple diminution of frequency, would not seem

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to remove the infarcted condition of the lungs.—  
The circulation, though diminished in velocity,  
is not equalized, & of course the lungs  
would retain the same relative proportion  
of accumulated fluids as before.

Sometimes it happens in this disease, that  
the eruption is tardy in making its appearance,  
or does not appear at all; or if it do  
appear, is of a pale, hiald, and unnatural  
colour. In such cases we are to  
be on our guard that we do not mistake  
the cause of such irregularity; if it arise  
from absolute debility, then, we path  
is plainly pointed out, & we shall pass  
because to the diffusible stimuli, such  
as wine, whisky, castor-oil, Biskies, warm  
baths, & Soda-sulphur, which is in many  
instances the best of diffusible stimuli.  
Should it however arise from acute irritation, which when very exasperated

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often produces this effect, one attention  
must be immediately directed to its  
removal; for this purpose we give an  
enema, if the stomach be loaded with  
irritating matter, & apply a blister to  
the epigastrium, which in many instances  
will operate like a charm, & is, perhaps  
more generally to be relied on in such  
cases, than all other means.

But should the irregularity of which I  
am now speaking arise from except of  
action, as has often fatally happened;  
then, we are to resort without delay to  
venesection, properly regulated, & to a cool  
airing & antiphlogistic regimen.

This particular condition is noticed  
by Sydenham, as occurring in the epidemic  
of 1679, & as his account so completely  
illustrates what I wish to enforce, I shall  
take the liberty to quote his own words.—

*Uligosoma*  
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"Aliquando," says he, "etiam post regimen intense calidum & panthe mate livescit prius, non  
nigrescunt; id vero adultis tantum canti-  
git, de quibus cancellationi est, ubi prius  
nigrescunt insipient, nisi Phlebotomia et tem-  
peratus regiminis refrigerio iis actionem sub-  
ministratur."

Sydenham not only bled adults freely in this disease, <sup>but</sup> even practised it on the smallest infants, & when the pulmonary inflammation was obtrusive he declares that he did not hesitate to repeat the operation & that he has seen many children, apparently at the point of death from this symptom, who "benedicto summo numine & reprobata venefictione were perfectly restored.

Sydenham however, seems to have had an aversion to bleeding in the early stage of the disease, maintaining that this operation should be reser-  
ved as a mean of combating the supervening pulmonary inflammation, so common towards

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its decline; Drat-Gaud also concurs with him  
in this opinion.

For my own part I am unable to reconcile  
this advice, with my present pathological  
views as to the nature of this disease,  
or with the views now generally entertained  
in relation to the exciting causes of infla-  
mation. If we suffer the fever to rage  
in the primary stages of the complaint,  
do we not voluntarily permit a powerful  
exciting cause of subsequent suppuration, &  
local inflammation to continue? or in other  
words, do we not cherish that very spark,  
that afterwards becomes the chief agent  
in producing all the future difficulty, & distress?  
Certainly nothing so effectually removes all  
the miserable symptoms of this disease, as a  
persistent, well directed, antiphlogistic course.  
The future danger arises from the lurking  
inflammation, & we may often prevent

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the most serious, & terrible consequences by long persistence, in this region. Should we not upon the same principle check this much desired inflammation, or wholly prevent its occurrence by striking at the root of its exciting cause, viz. the high fever & vascular action of the primary stage?

Some times it happens that this disease has a strong typhoidal tendency for the disease itself, & here one method of cure must be negotiated upon the general principle of equalizing the circulation, & supporting the tone of the vital powers. this is to be accomplished by emetics, of Phosacumba, tuncas, wine whey, carb. am. a vomiting diet, & opiate pastes, sinapisms, & should local congections supervene, they will require topical depletion, & counter irritation.

The effects of tubercula it has been observed

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are often more to be dreaded than the immediate disease, they are says Sydenham even more destructive than Small Pox, & may well be considered as the chief minister of Death in this disease.

The more common sequelae, are that of awakening the latent sarcophanic predispositions into action, exciting obstinate chronic ophthalmia, chronic bowel affections, & that of laying the foundation for a future Phthisis Pulmonalis or undermining the general energies of the constitution.

These, as I have before stated, can alone be remedied by effectually subduing the local & general inflammation.

It now & then happens that the laryngeal membranes, & muscles of the Gargan tube are a high degree of inflammatory action, & the voice becomes much impaired, or totally lost. In such cases we

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are to depend on topical depletion, by cups or leeches applied to the vicinity of the affected part; on counter irritation, & then rigid observance of the antiphlogistic regimen, under the regulation above recommended.

By some we are told, that instead of amputation, we should in cases of children, resort to sucking, & leeching; I should suspect, however, that this last injunction, has been derived more from the objections which Parents usually have to having their offspring Bleed than from any sound therapeutic principle, since the latter, are certainly much more painful methods of depleting, & do not of course operate on any other principle when applied to infants, than they do on those of adult age.

In summing up then, the methods

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Maderelli which I have recommended in  
the preceding pages for Rabies, & am  
enabled to add little to the summary  
of the Illustrous Homey; viz. 1. Tennessee  
bone acetate viribus et letore membranarum,  
2. Vomitus, 3. Dieta terminissima. 4. Poter multo  
dilutis acidulis.

We must, I repeat, from the ~~convenience~~<sup>convenience</sup>  
watch any local ~~alterations~~<sup>variations</sup>, that may take  
place in the progress of the disease, espe-  
cially to the Gangs, & these are to be ~~probably~~  
so treated, by general, & topical bloodletting,  
always keeping a steady eye on the  
constitution of the patient, & the nature  
of the case. I would more particu-  
larly insist on the early & prompt subdu-  
ction of these symptoms, as also of high  
Feverish excitement, in as much, as they  
alone lay the foundation for the remittent  
but less fatal consequences of the disease.

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In this as in all pulmonary affections, it is important to allay the cough & consequent irritation; & here, (if the fever be duly gratuated) we may almost always use opiate, either alone, or combined with camphor, with the very best effects.

In order to guard the patient against subsequent unpleasant symptoms, I would enjoin a mild unirritating diet, & direct him resolutely to avoid early exposure to cold.

Thousands die annually of this disease, & its sequelae, owing in a great measure to the prevailing notion that the disease requires no further treatment than can be directed by the Parent, or some ignorant nurse; this popular opinion is to be severely reprobated, & it should be fully impressed on the Public mind, that Measles always requires carefully to be watched.

by the Physician, although, in a majority of instances little of his assistance is required.

When Rabies, is known to prevail as an epidemic, such as are liable to it should prepare for its reception as in cases of Small Pox, by mild aperients, & vegetable diet; and a preparation is the most certain means of alleviating its occasional violence, & is in the opinion of some as emphatically demanded, as in Small Pox.

Phil. March 9<sup>th</sup>  
1829